

## APPLICATION DATA SHEET

### Application Information

Application Number::

Filing Date::

Application Type:: Regular

Subject Matter:: Utility

Suggested Classification::

Suggested Group Art Unit::

CD-ROM or CD-R?:: None

Number of CD Disks::

Number of Copies of CDs::

Sequence Submission?::

Computer Readable Form (CRF)?:: No

Number of Copies of CRF::

Title:: ESTERIFIED FATTY ACID COMPOSITION

Attorney Docket Number:: 033572-001

Request for Early Publication?:: No

Request for Non-Publication?:: No

Suggested Drawing Figure::

Total Drawing Sheets::

Small Entity?:: Yes

Latin Name::

Variety Denomination Name::

Petition Included?:: No

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers::

Secrecy Order in Parent Appl.?:: No

### **Applicant Information**

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: William

Middle Name:: P.

Family Name:: SPENCER

Name Suffix::

City of Residence:: Escondido

State or Province of Residence:: CA

Country of Residence:: US

Street of Mailing Address:: 1031 Calle de Lepanto

City of Mailing Address:: Escondido

State or Province of Mailing Address:: CA

Country of Mailing Address:: US  
Postal or Zip Code of Mailing Address:: 92025  
Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Patrick  
Middle Name:: S.  
Family Name:: MILLSAP  
Name Suffix:: Ph.D.  
City of Residence:: San Diego  
State or Province of Residence:: CA  
Country of Residence:: US  
Street of Mailing Address:: 7337 Melotta Street  
City of Mailing Address:: San Diego  
State or Province of Mailing Address:: CA  
Country of Mailing Address:: US  
Postal or Zip Code of Mailing Address:: 92119-1614

### **Correspondence Information**

Correspondence Customer Number:: 21839  
Phone Number:: (703) 836-6620

Fax Number: (703) 836-2021

### **Representative Information**

Representative Customer Number:: 21839

### **Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	An application claiming the benefit under 35 USC 119(e)	60/445,860	03/20/03

### **Foreign Priority Information**

Country::	Application Number::	Filing Date::	Priority Claimed::
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### **Assignee Information**

Assignee Name:: IMAGENETIX, INC.

Street of Mailing Address:: 16935 W. Bernardo Drive, No. 101

City of Mailing Address:: San Diego

State or Province of Mailing Address:: CA

Country of Mailing Address:: US

Postal or Zip Code of Mailing  
Address:: 92127